PATENT APPLICATION FEE DETERMINATION RECORD Effective December 8, 2004

Application or Docket Number 10/536997

| CLAIMS AS FILED - PART I | | | | | | | | SMALL ENTITY | | | OTHER THAN | |
|--|--|----------------------------------|--|-----------------------------------|---------------------|----------------------------------|----|-------------------------|------------------------|-----|---------------------|------------------------|
| | | | (Column | 1) | . (0 | Column 2) | | TYPE | | OR | SMALL E | NTITY |
| U.S. NATIONAL STAGE FEES | | | | | | | | RATE | FEE | | RATE | FEE |
| BASIC FEE | | | SMALL ENT. | = \$ 150 | LARG | E ENT. = \$ 300 | , | BASIC FEE | | 'OR | BASIC#EE | 300 |
| EXAMINATION FEE | | | | | | ner situations = 100 / \$ 200 | | EXAMPLE 13 | | | SAR LEB | Z00 |
| SEA | RCH FEE | | U.S. is ISA = \$50 / \$100 ALL other countries = \$200 / \$400 | | | ner situations = 250 / \$ 500 | - | 2142/2641 SEARCH FEE | | | SEARCH FEE | 400 |
| FEE FOR EXTRA SPEC. PGS. | | | minus 100 = | | | / 50 = | | X\$ 125 = | | | X \$ 250 = | / |
| TOTAL CHARGEABLE CLAIMS | | | 54 minus 20 = 1 34 | | | | | X\$25= | | OR | X \$ 50 = | 1700 |
| INDEPENDENT CLAIMS | | | minus 3 = | | | | | 75 00 = | | OR | X \$ 200 = | / |
| MUL | TIPLE DEPEN | DENT CLAIM PRE | SENT | | | Ū∕ | | + \$ 180 = | | OR | +\$ 360 = | 360 |
| * If | the difference | in column 1 is l | ess than zero, enter "0" in | | | lumn 2 | | TOTAL | | OR | TOTAL | 2960 |
| CLAIMS AS AMENDED - PART II | | | | | | | | SMALL E | NTITV | OR | OTHER SMALL E | |
| | | (Column 1) CLAIMS | · · · · · · · · · · · · · · · · · · · | (Colun | | (Column 3) | ſ | SWALL | ADDI- | | SWALLE | |
| AMENDMENT A | , | REMAINING AFTER AMENDMENT | | NUME PREVIO PAID I | USLY | PRESENT EXTRA | | RATE | TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * | Minus | ** | | = | | X \$ 25 = | | OR | X \$ 50 = | |
| | Independent | * | Minus | *** | | = | | X \$ 100 = | | OR | X \$ 200 = | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | + \$ 180 = | | OR | + \$ 360 = | |
| | | | | | | | | TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. FEE | |
| (Column 1) (Column 2) (Column 3) | | | | | | | | | | | | |
| AT B | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHE NUME PREVIO PAID I | ST SER USLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| DME | Total | * | Minus | ** | | = | | X \$ 25 = | | OR | X \$ 50 = | |
| AMENDMENT B | Independent | * | Minus | *** | | = | | X \$ 100 = | | OR | X \$ 200 = | |
| - | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | + \$ 180 = | | OR | + \$ 360 = | |
| | | | | • | TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. FEE | | | | |
| | . • | | • | | | | | | | | | |
| * | If the entry in colu | mn 1 is less than the | e entry in column 2 | 2, write "0" ir | n column | 1 3 . | | | | | | |
| If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20". If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. | | | | | | | | | | | | |